Montgomery County, MD Department of Liquor Control



NEW ITEM SETUP FORM

SUPPLIER ITEM NUMBER:	DLC ITEM NUMBER	DLC ITEM NUMBER	
PRODUCT NAME (As it will appear on your invoice):			
BRAND:	CASE/KEG COST:		
CATEGORY:	FREIGHT:		
TYPE:	TAX:		
PROOF:	BEER: Does item belong in a	BEER: Does item belong in a discount GROUP: Yes No	
SIZE OF UNIT:	IF SO WHAT IS THE GROUP D	IF SO WHAT IS THE GROUP DEAL PRICE? : \$	
PACKAGE:	s	SPECIAL ORDERS	
REGION:	CUSTOMER NUMBER	NUMBER OF CASES	
CONTAINER DEPOSIT:			
KIT:			
PALLET CONFIGURATION:			
TIERS PER PALLET:			
CASES/KEGS PER TIER:			
UNITS PER CASE:			
CASE WEIGHT:			
BEER: Bypass F/L Request @:			
SUPPLIER:			
SUPPLIER SITE (Shipping Address):			
SCC CASE (14 Digit):			
UPC BOTTLE (14 Digit):			
PLEASE ATTACH THE FRONT AND BACK OF THE LABE	L FOR THIS PRODUCT AND SUBMIT WITH THIS SETUI	P FORM. THANK YOU.	
I verify that this item is new and not listed in Mon	ntgomery County's portfolio under any tag:		
Your Name:	Name: Telephone :		